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THE EXAMINATION OF HEALTHY EATING ACROSS CULTURES: AN
EXISTENTIAL PHENOMENOLOGICAL APPROACH

An Honors Thesis submitted in partial fulfillment of the requirements for Honors in
Department of Health and Kinesiology

By

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(Under the Direction of Dr. Daniel R. Czech)

ABSTRACT

Adhering to a healthy eating plan has been a topic of discussion across World regions. Moreover, Americans often attempt to mimic the eating habits of other regions of the world, such as the Mediterranean or Eastern Asia, in an attempt to live a long and healthy life. Satia et al., (2000) suggest that healthy eating perceptions can be influenced by food and beverage exposure, family norms, preparation methods, and geographic locations. Although this is the case, little research has been found which has examined healthy eating perceptions across regions from a qualitative perspective. Thus, the purpose of this study is to examine the cross-cultural perceptions of healthy eating patterns. Mothers native to two countries (America and Italy) were interviewed from a phenomenological perspective on their experiences with eating healthy. The results revealed similarities in both what foods were perceived as healthy and how these foods were obtained. Discussion of nutritional perceptions and mindsets are presented.

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Background

America is composed of a population containing a staggering number of obese individuals, both young and old. There are many components to general health: mental state, daily environment, emotional disposition, and the types of foods one consumes. Diet composition is the cornerstone component in one's pursuit of overall health. Scientists in this field across the globe may agree on certain specific nutrients needed in the diet for the body to perform all necessary functions, but sources of those nutrients will vary drastically depending on location of observation. Sources of nutrients vary between regions because different foods grow in different climates, and some foods are products of cultural traditions. Each culture is unique in its opinions of what is considered part of a healthy diet, presumably due to local availability of particular resources and utensils.

Very little research has been founded on the cultural differences in what is deemed as a healthy diet. The existing research has examined healthy diet ideological differences from a very specific or similar population base. Torsch et al. (2013) made an effort to examine cross-cultural perceptions, but the subjects had immigrated to America from their respective country of birth. My participants will be living in their native country. Many studies have examined similar cultures on their differing opinions, but few have examined cross-continental countries (Rozin et al 1999), (Adamsson et al. 2012), & (Rozin et al 2005). Some researchers have conducted studies on what specific food groups are healthy in which portions. This fosters development of food guides for the general public, but they neglect preparation methods or a holistic approach to health (Yoshiike et al. 2007), (Willett et al 1995).

The purpose of this research is to examine how mothers' opinions of a healthy diet vary across continents. Participants will be interviewed in Italy and America via personal interview. In Italy, a local translator will assist with the interview to ensure correct interpretation of responses to questions. During analysis, notes will be taken on common foods and drinks mentioned when prompted to describe components of a healthy diet, emphasized food groups, common phrases used to describe a food, and definitions of the phrase "healthy diet", among other observations. This will aid in examining the phenomenon of differing opinions of a healthy diet cross-culturally. If a distant culture is particularly healthy, an attempt at applying elements mentioned in their perception of a healthy diet to American everyday life may be beneficial to Americans, thus making an effort to reduce obesity and hypokinetic diseases such as diabetes and cardiovascular disease in the United States.

Methodology

In Italy, five to six mothers will be invited at random to participate via word-of-mouth in a central square in the town. Their responses will be recorded using audio recorders. After the session is completed, an Italian native fluent in English will review my translation to check for errors and correct as needed.

Three American mothers will be invited to participate via word-of-mouth in a public park. They will be interviewed in person, if they consent, and recorded with the audio recorders.

The materials used in this study will be as follows: a broad, open-ended question, "What, in your opinion, constitutes a healthy diet?" in the native language (Italian or English). Follow up probing questions will be asked for elaboration purposes. Two audio

recording devices will be used during each interview. I will analyze the data in a four step process:

1. Approaching the interviews (Transcribing the interview and Obtaining a grasp of the Interview)
2. Focusing the data (Bracketing the data)
3. Phenomenological reduction (Eliminating irrelevant, repetitive, or overlapping data and Verifying the elimination of the data)
4. Releasing the meanings (Forming categories, Identifying the themes, and Describing the themes) (Czech et al., 2004)

Data Analysis

1. Approaching the interviews (Transcribing the interview and Obtaining a grasp of the Interview)
2. Focusing the data (Bracketing the data)
3. Phenomenological reduction (Eliminating irrelevant, repetitive, or overlapping data and Verifying the elimination of the data)
4. Releasing the meanings (Forming categories, Identifying the themes, and Describing the themes) (Czech et al., 2004)

Common responses (words and phrases) will be placed into a chart and number of repetitions will be recorded in the adjacent column. Audio recordings will be uploaded to Nvivo software to prepare for analysis.

RESULTS

Over the course of the interviews with the Italian mothers, three significant themes developed: (1) specific foods or food groups they considered healthy-the women consistently named the same or similar foods and labeled them “healthy”; (2) where they purchased these foods- participants mentioned where they bought the foods that they eat on a regular basis; and (3) their eating patterns- the women described how they cooked foods and what they ate when they didn’t cook.

These individual themes were subsequently broken down into sub-themes. For the theme of foods considered healthy, the subthemes included: (a) fish is a very common food to consume, (b) white meat and all vegetables are healthy, (c) fruit and yogurt is a popular snack, and (d) alcohol is perceived as a part of a healthy diet. For the theme of where they bought their foods the subthemes included: (a) supermarkets are the most common place to buy their groceries, (b) going out to eat less than two times in a week, and (c) they don’t grow their own foods. The last theme, eating patterns, consisted of the subthemes: (a) steaming is considered the healthiest method of cooking, and (b) pizza is the most popular food to order when they go out to eat.

A prominent theme revolved around the foods which the participants mentioned they ate or considered healthy. Fish was a popular food mentioned during the interviews, which the participants considered a healthy choice. Four out of five women mentioned eating some type of fish with vegetables or a salad when asked to describe their most often consumed dinner plate. For example, Participant 2 said that her most often consumed dinner plate was “a mixed salad with smoked salmon,” and Participant 1 stated that hers was “usually the second course, meat or fish with a salad and tomatoes.” Fruit

and yogurt were mentioned as popular snacks, the majority of participants mentioned them as a pair. Participant 5 said, “I like yogurt and fruit very much because they are healthy... if I am very hungry I eat ice cream and small snacks because I like them, but I prefer yogurt and fruit.” Participant 5 said, “Fruit would be [an] ideal [snack].” White meats such as pork and chicken were emphasized as being a healthy protein source. Participant 3 stated, “Chicken and veal as far as meat, a little bit of everything when it comes to vegetables”. Participant 2 said, “white meat, like chicken [and] all vegetables”, and Participant 5 said, “For lunch, pasta and vegetables like zucchini or eggplants, and for dinner, meat, but light [colored] meat.” Three out of five of the Italian participants stated that all vegetables are healthy to eat, rather than indicating specific vegetables. Finally, alcohol was seen as a healthy part of the diet, some participants specified by saying an occasional glass of wine with dinner was the best option.

During the interviews, the participants were asked to describe what constituted a healthy diet and what their definition of healthy was. A variety of approaches were taken to answer these questions:

Participant 1: “[A healthy diet is] regular meals, (i.e. more than three meals a day), possibly eating a snack in between meals...and a lot of vegetables. [Healthy is] something that makes you feel good, foodwise something that makes you feel full without overfilling you, I mean you eat, but you don’t eat too much of it in order for you to feel good.”

Participant 2: “[A healthy diet is] the combination of carbohydrates, protein, vitamins and amino acids. [Healthy is] a balanced food that has all the nutrients that the body needs.”

Participant 3: “[A healthy diet is] the most possible varied diet, i.e. a diet that includes carbohydrates, protein, and vitamins. [Healthy is] for sure a diet that contains a good dose of veggies [and] fruit. Cooking methods are important.”

Participant 4: “[A healthy diet is] a varied nutrition...fruit and vegetables and pasta, a little dressing and olive oil.”

Participant 5: “According to me, one should eat at least five portions of fruit and vegetables, a few carbs, a [little] protein. For me, healthy means “poco”, a little, you don’t have to eat a lot. Quality, fresh food.”

Where participants bought their food developed a second theme. Unanimously, participants stated that they purchased food items from supermarkets, but never mentioned specific stores; three women mentioned buying from local farmers on occasion. These participants acknowledged that foods purchased from the grower are the best option, but implied that it is not always a realistic option. Participant 1 stated, “The healthier [fruits and vegetables] are the ones bought directly from the producer.” Participant 2 believed that healthy foods come from “organic veggie gardens [and] healthy breeding farms, where the [laws] are respected.” Four out of the five participants mentioned eating out at restaurants two times or less every week, and did not grow any foods in a home garden. Participant 4, the only woman who admitted to having a home

garden, said, “The produce [I get] from there are healthy; however, nothing comes out from the veggie garden since he doesn’t use pesticides, so we get very little.”

Finally, eating patterns were a common theme. Multiple participants named steaming as the healthiest method of cooking. Participant 3 gave the response, “the most natural, the healthiest [method] is steaming” and “[healthy] cooking methods won’t require the use of a lot of fats.” Participant 4 said, “I steam veggies, or I cook with a nonstick pan with the least amount of olive oil possible...I eat the Tuscan way: olive oil, and butter almost never.” Participant 2 said, “Steaming, not fried, with only olive oil as dressing, slightly cooked.” They also mentioned ordering pizza most often when they eat out at a restaurant.

As with the Italians, three overarching themes were established for the American mothers: (1) foods and food groups perceived as healthy – among the interviews, there was a significant amount of repetition of the same or similar foods which the participants deemed healthy, (2) eating patterns – the women spent a considerable amount of time explaining eating habits, as well as how they cooked, and (3) their associations with certain foods – a sort of stigma was evident with some foods.

These individual themes were, again, as with the Italian participants, broken down into sub-themes. For the theme of foods perceived as healthy, the subthemes included: (a) cheese was commonly mentioned, (b) fruits and vegetables were healthy to eat, and (c) lean proteins are healthy. For the theme of eating patterns, the subthemes included: (a) supermarkets are the most popular place for grocery shopping, (b) time spent sitting down to meals, (c) how often they had meals as a family, and (d) grilling is the healthiest

cooking method. For the final theme of associations with certain foods, the subthemes consisted of: (a) being a typical American is associated with eating fast food regularly, (b) a negative connotation is associated with processed foods, (c) organic foods are too expensive to be worth the benefits, and (d) fresh is associated with healthy.

The most obvious theme, as with the Italians, was centered on the specific foods or food groups they thought were healthy. Cheese, fruits, vegetables, and chicken were the most repeated. Not only did the women describe fruits and vegetables as part of a healthy diet, but in every interview, fruits and vegetables were mentioned before any other food group. When meats were mentioned, lean proteins, such as chicken (the most popular response), pork, and fish were either stated specifically or the phrase “lean protein” was used.

Participant 1: “I constantly have skim milk in the fridge, I do, I guess yogurt and cheese...most fruits, I’ll do zucchini, asparagus, broccoli, corn. Those are my favorites.

Participant 3: “Boneless, skinless chicken...free range when we buy meats or whatever and then for dairy I try to do low fat. I also do skim milk. We eat a lot of rice too...brown and white.

Participant 4: “chicken, especially chicken breast...we don’t eat a lot of fish because my husband doesn’t care for it, so it kinda goes to waste. [One percent fat] milk, cheese, yogurt... I think I do kind buy into fat for brain development kinda thing, so I still give [the children] whole milk, then they mostly eat yogurt and we all eat cheese...Vegetables? Asparagus...green beans...green leafy kinda things. I do a lot of broccoli. Fruits we are a little better at, we do bananas, strawberries, blueberries, apples,

pineapple, peaches, cherries, grapes...[For carbs], we try to do whole wheat when we can but mostly it's just- you know- that fake whole wheat stuff, it's the honey wheat kinda stuff."

Participant 5 said, "low fat cheese, like two percent or less" was the best option in her opinion. She also brought up "low fat cottage cheese [and] fat free yogurt. Lean protein, like chicken or fish...chicken, pork chops that are lean, lean red meat, like, ground sirloin as opposed to hamburger or ground beef and fish- salmon or halibut. Darker greens, broccoli and leaf lettuce that's the dark leaf, spinach, of course green beans, and celery, [and] carrots. Fruits? Raspberries, blackberries, strawberries, apples, bananas. Complex carbohydrates like brown rice or whole grain rice, long grain and wild rice. Whole wheat pasta and not so much...more the complex [carbs]. Not so much potatoes, but like sweet potatoes as opposed to white potatoes."

During the interviews, as with the Italian participants, the American mothers were asked to describe what constituted a healthy diet and what their definition of healthy was. The following responses were given:

Participant 1: "I think a healthy diet is a well-balanced diet, I don't believe in these low carb or you know, no sugar...I believe you should eat all the food groups, and try to eat them as best you can in the portions you should, but I also believe you should have a cheat day and enjoy life a little. [Healthy is] in terms of eating...I think it's a balance. I think that if you want ice cream, you should have ice cream. You want a chocolate bar; you should have a chocolate bar. I think a lot of it is, you know, moderation."

Participant 2: “[A healthy diet is] eating fruits and vegetables, meat... not a lot of sweets”

Participant 3: “[A healthy diet is], I would say more fruits and vegetables, less, you know, animal fat and processed food.”

Participant 4: “In general terms, [a healthy diet has] minimal junk food, sugars, and refined things like that. Starches, white flour, all that good stuff, s minimize that stuff...variety. So, fruits, vegetables, meats, all different sources, a kinda balance I guess so you’re not getting too much of one thing and not enough of something else...I don’t think you have to eat organic or you have to eat low fat...to have a healthy diet.”

Participant 5: [A healthy diet is] fruits and vegetables, complex carbohydrates and protein. Healthy [is] if it gives you energy, fills you up, and sustains you for a while.

Eating patterns was a surprisingly prominent theme. Unanimously, the participants bought these foods from various supermarkets. Participant 1, with the widest range of responses, bought weekly groceries from “Kroger, Wal-Mart, Publix, Whole Foods [and] Fresh Market”, but the majority of the women shopped at either Kroger or Wal-Mart. Four out of the five participants stated that they spend at least 40 minutes sitting down to dinner with their families. In addition to this, they mentioned that they eat family meals at least four nights per week. Lastly, grilling was emphasized as one of the healthiest ways to prepare foods, especially meats. For example, when asked about the healthiest food preparation methods, the women stated:

Participant 1: “I believe that grilling or either- and vegetables raw are probably better, and sometimes steamed I believe are best...I think frying’s horrible, boiling it-

some of the nutrients I think you lose cuz you can actually see the color come out in the water...sometimes I'll sauté, like I'll put a little olive oil and sauté it, I think that's ok too."

Participant 2: "We grill all of our foods."

Participant 3: "Grilled and not fried, not that that's what I like the best... [and] steamed vegetables."

Participant 4: "You know, frying definitely not at the top of my list for my health...especially if you...rely too heavily on it. Obviously, occasionally it's not gonna kill you...definitely baking, steaming, broiling kinda thing, and we try to [grill]. That sorta stuff."

Participant 5: "Steam it! Steam it as opposed to using any additives-oil or salt."

Finally, the participants were consistent in their interpretations and opinions of certain types of foods. For instance, several participants associated the typical American with eating fast food regularly. There was also a strong negative connotation associated with processed foods. When asked to compare themselves to the average American, these women gave similar responses. For example, Participant 4 had this to say, "Well, I try not to eat a lot of fast food, but I'm probably your average by any stretch of the imagination", and "pretty average... We do...eat out, we do take out a bit, we try to limit...fast food. I'm kinda right there in the middle I guess." Participant 5 combined the association of being American and eating fast food with the negative perception of processed foods when she said, "We eat a lower fat-lower saturated fat diet than I think the average, [because] we don't eat fast food, and we don't eat a lot of processed food." When asked

the question, “Where do you think healthy foods come from?” she responded “whole foods that are grown, as opposed to processed.” Participant 3 emphasized, “Less...animal fat and processed foods” when she was asked to describe components of a healthy diet, and Participant 2 said, “You know healthy foods if they’re not processed. The story is [that] processed is less healthy than your organic or your from-the-ground type of food. If [the farmers are] using chemicals and things on it, it’s not necessarily healthy...because of all the things that have-the stuff in the ground.” They also believed that organic foods were too expensive to be a practical option, despite their possible health benefits. Participant 1 went as far as saying, “I believe organic is a little bit over-hyped,” but continued with, “I believe natural, as far as things that came from the earth and sea are probably...definitely better for you than processed food.” Four out of the five participants associated organic with buzzwords like expensive and cost-prohibitive. Participant 2 said, “We’re not obsessed about organic or things like that. Organic is relatively more expensive, so if you’re trying to watch what you spend, that’s not gonna be the way you wanna go.” Participant 3 said, “I don’t typically buy organic because it’s more expensive.” Participant 4 stated, “Organic I do think can be important. I think it’s unfortunate that it’s cost-prohibitive in some situations.” Participant 5 said she, “definitely [does not buy] organic because of the cost of it.” Fresh was a frequent buzzword as well, when the women elaborated on components of a healthy diet. For example, Participant 5 said, “fresh vegetables as opposed to the frozen or canned” were a healthy option.

DISCUSSION

The purpose of this section is to add the results of this study to the previous knowledge gained from other studies on the topic of cross-cultural healthy diet perceptions. Each section consists of results from this study, comparing American and Italian responses, and relates previous similar or relevant research.

The purpose of this study was to compare and contrast the perceptions of a healthy diet across continents (i.e. cross- cultural differences). Three overarching themes developed during this process, which demonstrate the differences in opinions about healthy diets between Italian and American mothers.

Specific Foods Considered Healthy

This major theme was a direct result of the nature of the initial open-ended question, and elaborative questions. The majority of the participants described what constituted a healthy diet by responding with specific foods they ate, rather than a general list of nutrients such as carbs, proteins, vitamins, minerals, et cetera. A large portion of the interviews were spent describing foods in various food groups, which clearly demonstrates the participants' perception of what was healthy. This theme involved subthemes in which participants described foods which they perceived as healthy.

Fish. Fish was very frequently mentioned as a healthy food and a commonly consumed meal item during the Italian interviews. Interestingly, Americans mentioned fish as being healthy, but when describing what they ate regularly, fish was rarely included in their responses. This shows that Americans know what is healthy to eat, but fail to put it into practice, while the Italians are able to be consistent with the two categories.

An unexpected finding was an apparent barrier Americans experienced when they described eating healthy. They consistently described it as if it were out of reach for them. They had a clear idea of what was healthy, but for some reason they could not put it into practice. In contrast, the Italians showed consistency in knowing what was healthy and putting it into practice. Perhaps this is a result of the geographical differences in the two populations. For example, both Italians and Americans recognized fish as healthy to eat, and the Italians consistently mentioned eating fish. The Americans did not mention eating it as often.

The geography of Italy is more conducive to eating fish because they are a narrow peninsula surrounded by water on three sides. This may cause fish to be caught and shipped easily and cheaply. America, however, is a wide country with only two sides of water. This may cause prices of fish to be higher the further inland it must be shipped, therefore less accessible due to cost. Americans, instead, eat more beef, which is a livestock that requires large areas of flat land to graze. This happens to be plentiful in the Great Plains region of the United States, but Italy is split vertically down the middle into east and west by the Apennine Mountains, which make flat grazing areas rarer occurrences than in America.

White Meat and Vegetables. The Italians repeatedly associated white meats with a healthy diet, which was a more specific approach than they used with describing healthy vegetables. It seemed that many of them were convinced that all vegetables were healthy, and one must try to incorporate as many as possible in the diet and emphasize variety with this food group. Americans, on the other hand, were fixated on chicken specifically as a healthy meat. As mentioned earlier, fish was considered a healthy meat as well, but

the Americans stated it less often. According to a 1997 study, seventeen percent of the Italians surveyed said a diet with less red meat or meat products is considered healthy, and thirty-three percent believed that fruits and vegetables composed a healthy diet. When it came to vegetables, the Americans, overall, emphasized variety as well, but were much more specific with their responses.

Fruit and Yogurt. For the Italians, having a fruit and some yogurt for a snack was both a popular choice and considered healthy. Rarely were the two foods mentioned separately, and always for a snack. The Americans were more likely to mention these separately, but they were also eaten as snacks. The Americans, again, were more specific with their fruit examples than the Italians.

Alcohol and Cheese. To the majority of the Italians, alcohol was considered part of a healthy diet, but they were very specific in mentioning wine as the form of alcohol. Americans were less united in their opinion of alcohol, but those who deemed it part of a healthy diet, also specified it in the form of wine. Americans were particularly quick to mention cheese as part of a healthy diet, or a food they regularly consumed. This was a direct result of the elaborative question about healthy dairy in the diet. Italians never mentioned cheese during the interviews.

Food Purchasing Location

The major theme of food purchasing location was developed by all of the participants. It seems logical that a healthy diet would begin with where your food items come from, and based on the responses given, three subthemes developed.

Supermarkets and No Home Garden. All of the participants, American and Italian, admitted to buying most or all of their groceries from supermarkets. As in many other situations, the American participants offered more specific responses. They named grocery store chains as opposed to simply answering supermarkets in general, which was the Italians' tendency. It was also apparent that foods bought from local farmers or open-air markets were healthier than those bought in supermarkets, but very few participants admitted to putting that opinion into practice. Contrary to the original hypothesis, Italians, with the exception of one participant, did not have a home garden. Surprisingly, more Americans reported having, or at least attempted in the past, to have a home garden. It was also apparent that foods bought from local farmers or personally grown were healthier, but it clearly contradicted the participants' habits.

Out to Eat Frequency. Italians reported eating out less than two times per week on average. The Americans greatly contrasted this by reporting a range of one to four or more times per week. These numbers could be made significantly larger if the restaurant portion sizes are taken into account because the Americans sometimes mentioned taking home leftovers. This practice is not common in Italian culture, so it was not taken into account in the Italians' responses.

Eating Patterns

Sitting Down to Meals and Frequency of Family Meals. The Americans reported eating family meals at least four nights per week, while the majority of Italians reported having at least one family meal every day. Four out of five of the Americans stated that when they had family meals together, they would sit down to eat for at least forty

minutes. The Italians had a wider range of responses, from no time together to about an hour.

Grilling is Healthiest Cooking Method and Steaming is Healthiest Cooking Method. The Americans consistently named grilling; some included steaming, as the healthiest method to cook food, but the Italians settled on steaming as the best option. Interestingly, both groups named frying as the least healthy method.

Pizza is Most Popular Eat -Out Food. The Italians specifically mentioned ordering a pizza when they ate out at a restaurant. This contrasts the Americans in that they reported more cultural variety in their meals that were made and/or eaten outside the home. This could be due to the homogeneity of Tuscan Italy, pride associated with authentic Italian food, and the vast cultural diversity present in the United States.

Associations with Foods

Americans and Fast Food and Negative Connotation with Processed Foods. The Americans demonstrated a strong association between the average American and eating fast food on a regular basis. This was usually a negative association, as if being the average American by this definition was something to look down upon. This attitude suggests that these Americans were convinced that fast foods are examples of unhealthy foods, and they applied a positive connotation to meals made in the home because healthier cooking methods can be used. Similar to this, was the negative connotation associated with eating processed foods; it was usually synonymous with unhealthy. This may be why produce was commonly named as healthy foods. They have the less of an opportunity to be processed (with additives and preservatives) than fast food.

Organic is Too Expensive and Fresh Associated with Healthy. The American participants mentioned organic foods, and shared the idea that they are too expensive to be worth the possible health benefits. There seems to be a limit as to how much the participants were willing to spend in return for health benefits or avoidance of negative effects of non-organic foods, and the price of organic foods exceed that limit. This also implies that they perceive organic foods as healthier options than non-organic foods. The Italians were not impressed with organic foods either, but for reasons unrelated to cost. Fresh was a buzzword that the Americans used that seemed to be synonymous with healthy, but the Italians made no such association.

Some limitations were obvious and unavoidable in this study. Particularly, the Italian interviews were difficult because the women were not very familiar with the English language, and the conversational interview was difficult when an English phrase did not translate well into Italian. This language barrier may have had an effect on the responses they gave during the interviews, as well as the amount of detail they were able to give. A second limitation was the lack of regional diversity in the subjects. The Italian women were all from the Tuscan region, a rural and agriculturally- focused part of Italy, and the American women were from the Metro Atlanta area, which is a suburban business community. The two groups of mothers vary greatly in their access to resources such as grocery stores and perhaps healthier foods. This most likely had a significant impact on how the participants responded in the interviews.

For future research, it will be beneficial to obtain more subjects from different regions of the countries. For example, Milan and Rome are much more industrially-

focused than the agricultural towns in Tuscany, and the Midwestern United States will have more agriculturally- focused areas than cities on the east coast.

The results of this study are important because it has examined healthy eating in a new perspective. Previous studies have used populations that are from a single culture. By design, this study reveals a possible explanation for the difference in physical health and presence of hypokinetic disease among the populations by comparing the opinions of two dissimilar cultures. Italy has a reputation as a generally healthy country because the Mediterranean diet is considered balanced in nutrients. On the contrary, the typical American, who is overweight or obese and has a higher risk for heart attacks and strokes than an Italian of the same age. From this research, Americans can attempt to incorporate some of the Italian foods, cooking methods, and eating patterns in their daily lives to lead to a healthier lifestyle.

REFERENCES

- Adamsson, Viola, Anna Reumark, Tommy Cederholm, Bengt Vessby, Ulf Rise'rus, and Gunnar Johansson. "What Is a Healthy Nordic Diet? Foods and Nutrients in the NORDIET Study." *Food & Nutrition Research* (2012): n. pag. Print.
- Bech-Larsen, Tino, and Klaus G. Grunert. "The Perceived Healthiness of Functional Foods; A Conjoint Study of Danish, Finnish, and American Consumers' Perception of Functional Foods." *Appetite* 40.1 (2003): 9-14. Print.
- Margetts, B. M., J. A. Martinez, A. Saba, L. Holm, and M. Kearney. "Definitions of 'healthy' Eating: A Pan-EU Survey of Consumer Attitudes to Food, Nutrition and Health." *European Journal of Clinical Nutrition* 51.9 (1997): S23-29. Print.
- Oakes, Michael E., and Carole S. Slotterback. "The Good, the Bad, and the Ugly: Characteristics Used by Young, Middle-aged, and Older Men and Women, Dieters and Non-dieters to Judge Healthfulness of Foods." *Appetite* 38.2 (2002): 91-97. Print.
- Rozin, P., C. Fischler, S. Imada, A. Sarubin, and A. Wrzesniewski. "Attitudes to Food and the Role of Food in Life in the U.S.A., Japan, Flemish Belgium and France: Possible Implications for the Diet-Health Debate." *Appetite* 33.2 (1999): 163-80. Print.
- Rozin, Paul, PhD. "The Meaning of Food in Our Lives: A Cross-Cultural Perspective on Eating and Well-Being." *Journal of Nutrition Education and Behavior* 37 (2005): 107-12. Print.
- Satia, Jessie A., PhD, MPH, Ruth E. Patterson, PhD, RD, Vicky M. Taylor, MD, PhD, Carrie L. Cheney, PhD, RD, Sharyne Shiu-Thornton, MS, Kamolthip Chitnarong, and Allen R. Kristal, DrPH. "Use of Qualitative Methods to Study Diet, Acculturation, and Health in

Chinese-American Women." *Journal of the American Dietetic Association* 100.8 (2000): 934-40. Print.

Torsch, Vicki L., and Grace X. Ma. "Cross-Cultural Comparison of Health Perceptions, Concerns, and Coping Strategies among Asian and Pacific Islander American Elders." *Qualitative Health Research* 10.4 (2000): 471-89. *Sage Journals*. Web. 22 Feb. 2013. <<http://qhr.sagepub.com/content/10/4/471.full.pdf+html>>.

Willett, Walter C., Frank Sacks, Antonia Trichopoulou, Greg Drescher, Anna Ferro-Luzzi, Elisabet Helsing, and Dimitrios Trichopoulos. "Mediterranean Diet Pyramid: A Cultural Model for Healthy Eating." *American Journal of Clinical Nutrition* 61.6 (1995): 1402S-406S. Print.

Yoshiike, Nobuo, Fumi Hayashi, Yukari Takemi, Keiko Mizoguchi, and Fukue Seino. "A New Food Guide in Japan: The Japanese Food Guide Spinning Top." *Nutrition Reviews* 65.4 (2007): 149-54. Print.